

## Fire Extinguisher Program

### APPLICATION Exempt Organizations



☐ New Application "EXEMPT" Concern

New Concern License Name: \_\_\_\_\_

Previous Concern Name: \_\_\_\_\_ E# \_\_\_\_\_

Current Physical Address: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Owner/Contact Person: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

**PLEASE READ CAREFULLY: The following documentation is required with ALL application. Missing documentation will result in the delay of processing your submitted information**

1. ☐ Provide a reciprocal agreement letter for high pressure hydrostatic testing from a TYPE A or E licensed company: include their retail concern number and license classification type.  
-or-
2. ☐ Provide a copy of current D.O.T. certification with this application along with D.O.T. Retester identification number (RIN).
3. ☐ Provide Halon Recovery System certificate/or reciprocal letter
4. ☐ Provide a Hold/Harmless Letter per section 595.13 (c).
5. ☐ Provide a list of employees (with each application), including you, their EE number and types of services performed. Attach additional sheets as necessary.

Name \_\_\_\_\_ EE# \_\_\_\_\_ Types \_\_\_\_\_

Name \_\_\_\_\_ EE# \_\_\_\_\_ Types \_\_\_\_\_

Name \_\_\_\_\_ EE# \_\_\_\_\_ Types \_\_\_\_\_

6. ☐ Provide list of equipment used to service Fire Extinguishers

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**Instructions for signing:**

I certify that I am familiar with the statutes contained in the California Health and Safety Code and the regulations contained in Title 19, California Health and Safety Code and the regulations contained in Title 19, California Code of Regulations, relating to portable fire extinguishers; that all statements made by me on this application are to the best of my knowledge true and correct.

I hereby authorize the State Fire Marshal and any of his properly authorized employees at any time to enter, examine, inspect any premises, building, room or establishment used in servicing, charging or testing portable fire extinguishers to determine compliance with the provisions on state law and the regulations and standards adopted by the State Fire Marshal.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

## **ATTACHMENT “A”**

**\*\*Please Note: Licensees must possess ALL necessary service manuals, tools, parts and equipment to perform the necessary tests and service that they are licensed for. Please refer to attached supply list**

**Type A** The classification of license (595.5 (a) (1)) to service, recharge, inspect, and conduct hydrostatic tests on any or all type of extinguishers. Includes all service and tests permitted for B, C, D, E and F licenses. This includes halogenated agent fire extinguishers six-year tear down, hydrostatic tests of high-pressure fire extinguisher cylinders as well as being a D.O.T. approved cylinder requalification facility for testing D.O.T. low-pressure fire extinguisher specification cylinders. An “A” license must possess all necessary service manuals, tools, parts and equipment to perform necessary tests and service.

**Type B** The classification of license (595.5 (a) (2)) to perform maintenance and recharging of water based fire extinguishers and external maintenance of carbon dioxide fire extinguishers.

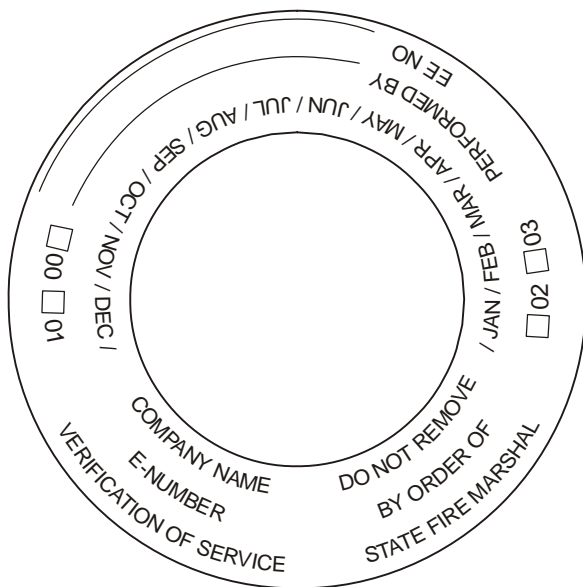
**Type C** The classification of license (595.5 (a) (3)) to conduct hydrostatic tests of low-pressure fire extinguisher cylinders. A fire extinguisher concern possessing this class of license shall be a D.O.T. approved cylinder requalification facility if D.O.T. specification cylinders are tested.

**Type D** The classification of license (595.5 (a) (4)) to perform maintenance and recharging of dry chemical, dry powder and **external maintenance of halogenated agent fire extinguishers.** **Note: in order to weigh and tag a halogenated extinguisher, you must obtain a reciprocal letter from a company with a Halon Recovery Machine.**


**Type E** The classification of license (595.5 (a) (5)) to conduct hydrostatic tests of high pressure fire extinguisher cylinders, and perform internal maintenance and recharging of carbon dioxide fire extinguishers. A Fire extinguisher concern possessing this class of license shall be a D.O.T. approved cylinder requalification facility.


**Type F** The classification of license (595.5 (a) (6)) to perform internal maintenance recharge and recover halogenated agents from portable fire extinguishers. A fire extinguisher concern possessing this license shall have a listed Halon 1211 closed recovery system.

Collar ring specification requirements as of April 1,  
2002



VERIFICATION OF SERVICE COLLAR

DO NOT  REMOVE  
BY ORDER OF  
THE STATE FIRE MARSHAL

|    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |  |     |     |     |     |     |     |     |     |     |     |     |     |      |      |      |      |      |
|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|------|------|------|------|
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Type<br><br>EE<br>(Cert. Reg. No.)<br><br>(Signature)<br><br>Name and<br>Address of Firm<br><br><br>ANNUAL<br>MAINTENANCE<br>PERFORMED <input type="checkbox"/><br><br>NEW<br>EXTINGUISHER <input type="checkbox"/> | DEC | NOV | OCT | SEP | AUG | JUL | JUN | MAY | APR | MAR | FEB | JAN | 2005 | 2004 | 2003 | 2002 | 2001 |
|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|------|------|------|------|

ANNUAL MAINTENANCE TAG

| 2001                           |   |   | 2002 |   |   | 2003 |   |   | 2004 |    |    | 2005                                       |  |  |
|--------------------------------|---|---|------|---|---|------|---|---|------|----|----|--|--|--|
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 10   | 11 | 12 |  |  |  |
| CONCERN NAME                   |   |   |      |   |   |      |   |   |      |    |    |  |  |  |
| ADDRESS                        |   |   |      |   |   |      |   |   |      |    |    | RIN  |  |  |
| E-NUMBER                       |   |   |      |   |   |      |   |   |      |    |    |  |  |  |
| HYDROSTATICALLY TESTED AT PSI. |   |   |      |   |   |      |   |   |      |    |    | <input type="checkbox"/> S - MODIFIED TEST |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |  |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |  |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |  |  |  |

HYDROSTATIC TEST LABEL  
D.O.T SPECIFICATION CYLINDERS

| 2001                           |   |   | 2002 |   |   | 2003 |   |   | 2004 |    |    | 2005 |  |  |
|--------------------------------|---|---|------|---|---|------|---|---|------|----|----|------|--|--|
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 10   | 11 | 12 |      |  |  |
| CONCERN NAME                   |   |   |      |   |   |      |   |   |      |    |    |      |  |  |
| ADDRESS                        |   |   |      |   |   |      |   |   |      |    |    |      |  |  |
| E-NUMBER                       |   |   |      |   |   |      |   |   |      |    |    |      |  |  |
| HYDROSTATICALLY TESTED AT PSI. |   |   |      |   |   |      |   |   |      |    |    |      |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |      |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |      |  |  |
| 1                              | 2 | 3 | 4    | 5 | 6 | 7    | 8 | 9 | 0    |    |    |      |  |  |

HYDROSTATIC TEST LABEL  
NON-D.O.T. SPECIFICATION CYLINDERS